

| POSITION | INITIALS | ID NC. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | B7 | 20386 | |
| O.I.P.E. CLASSIFIER | | 25 | 08-03-99 |
| FORMALITY REVIEW | 193 | 60080 | 8/12/99 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 1 | ✓ | ✓ | 7-02-99 |
| 2 | ✓ | ✓ | 5-3-99 |
| 3 | ✓ | ✓ | 5-27-99 |
| 4 | ✓ | ✓ | 5-27-99 |
| 5 | ✓ | ✓ | 5-27-99 |
| 6 | ✓ | ✓ | 5-27-99 |
| 7 | ✓ | ✓ | 5-27-99 |
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| Claim | Final | Original | Date |
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| 46 | ✓ | ✓ | 5-27-99 |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here